

Access Monitoring Review Plan

Presented by:

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Our Mission

Improving health care access and outcomes for the **people** we serve while demonstrating sound stewardship of financial **resources**

Our Vision

- Health First Colorado members can access: the right health services, at the right time, in the right setting, for the right duration.
- The Department conducts ongoing and appropriate access evaluation, develops evidence-based recommendations, and implements actionable solutions, in a timely and transparent manner.

Access Domains



What is the Department Doing to Evaluate Access to Care?



Ongoing Access Evaluation



Alignment Across Programs and Activities



Tracking, Evaluation & Reporting on Access Issues



Rate Review Access Analysis and Committee



Federal Regulatory Compliance

Our Engagement Commitments

- Thoroughly and thoughtfully evaluate all questions and feedback.
- Identify what feedback can be incorporated now or potentially in the future.
- Transparently communicate the outcomes of feedback and questions.
- Refer individuals to appropriate Department resources for out-of-scope topics.

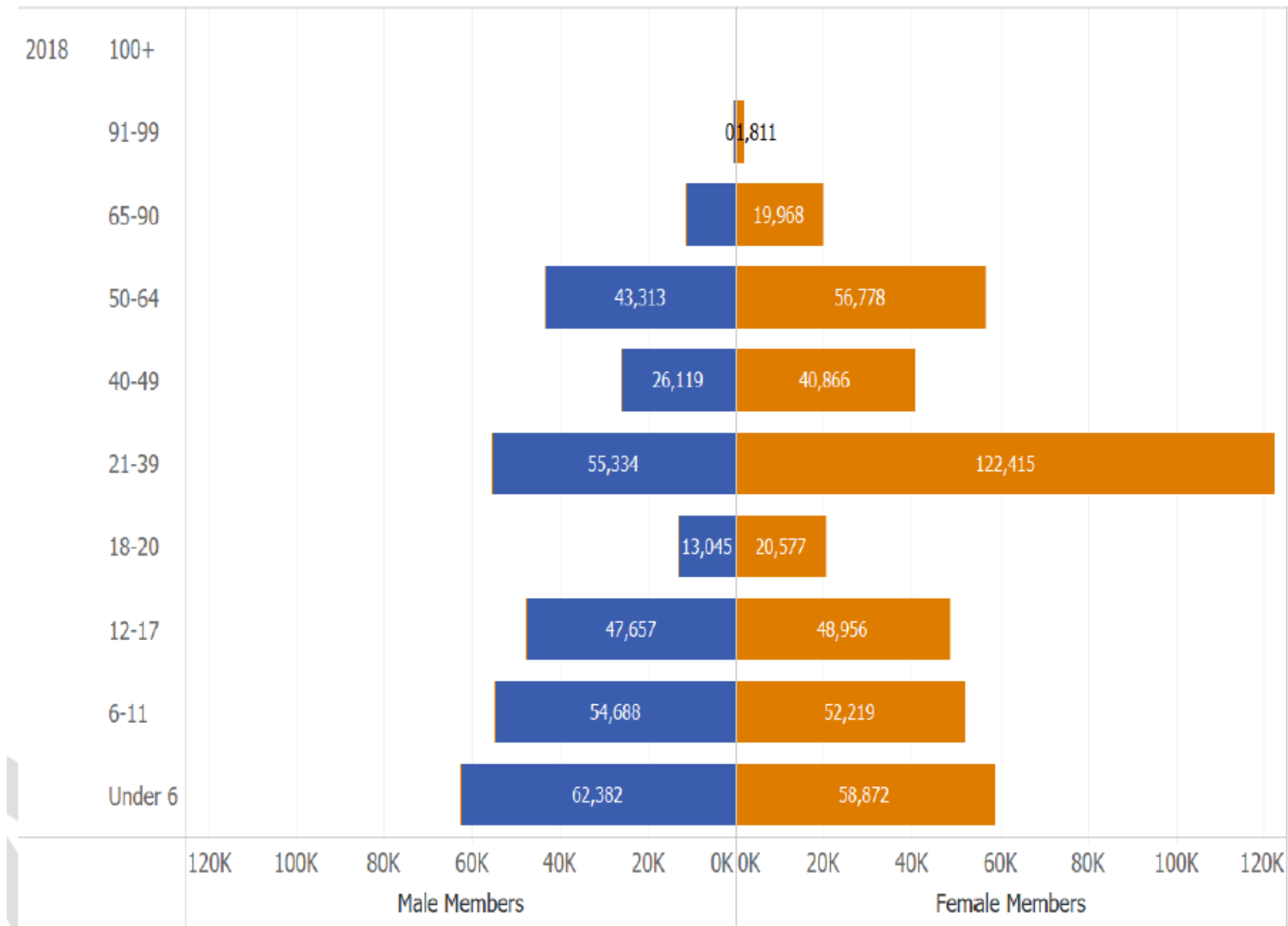
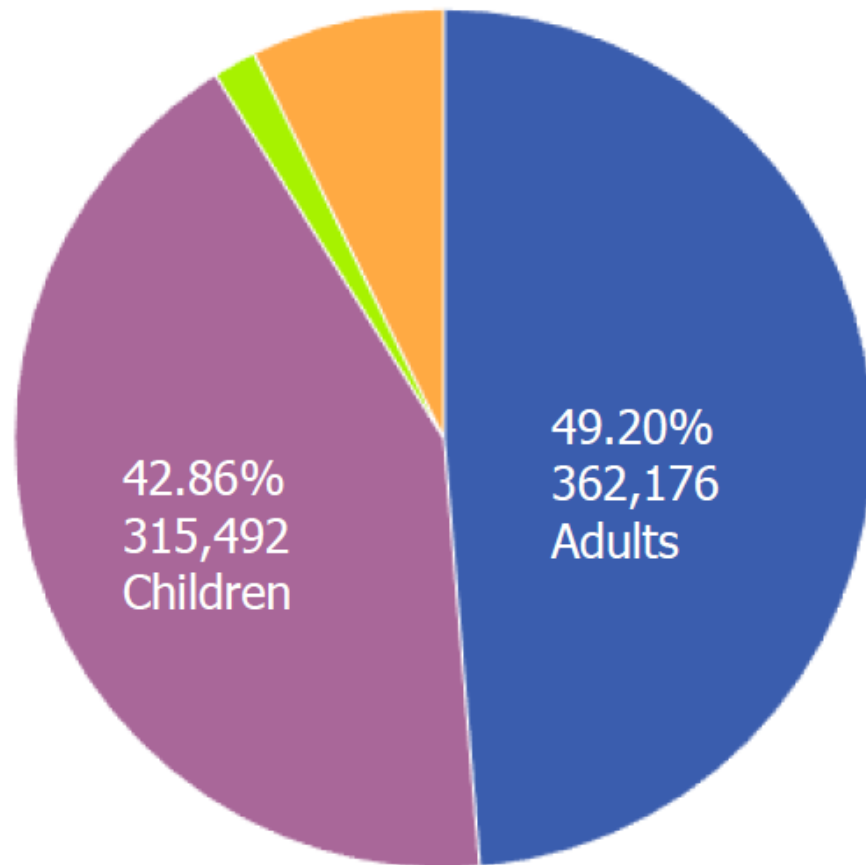
Federal Access Requirements

- *Methods for Assuring Access to Covered Medicaid Services* (80 FR 67575)
 - Requires states to consider whether access to health care services will be impacted when provider fees are lowered or rebalanced (exceptions apply).
 - Also requires states to draft an Access Monitoring Review Plan (AMRP) every three years to evaluate access broadly.

Access Monitoring Review Plan

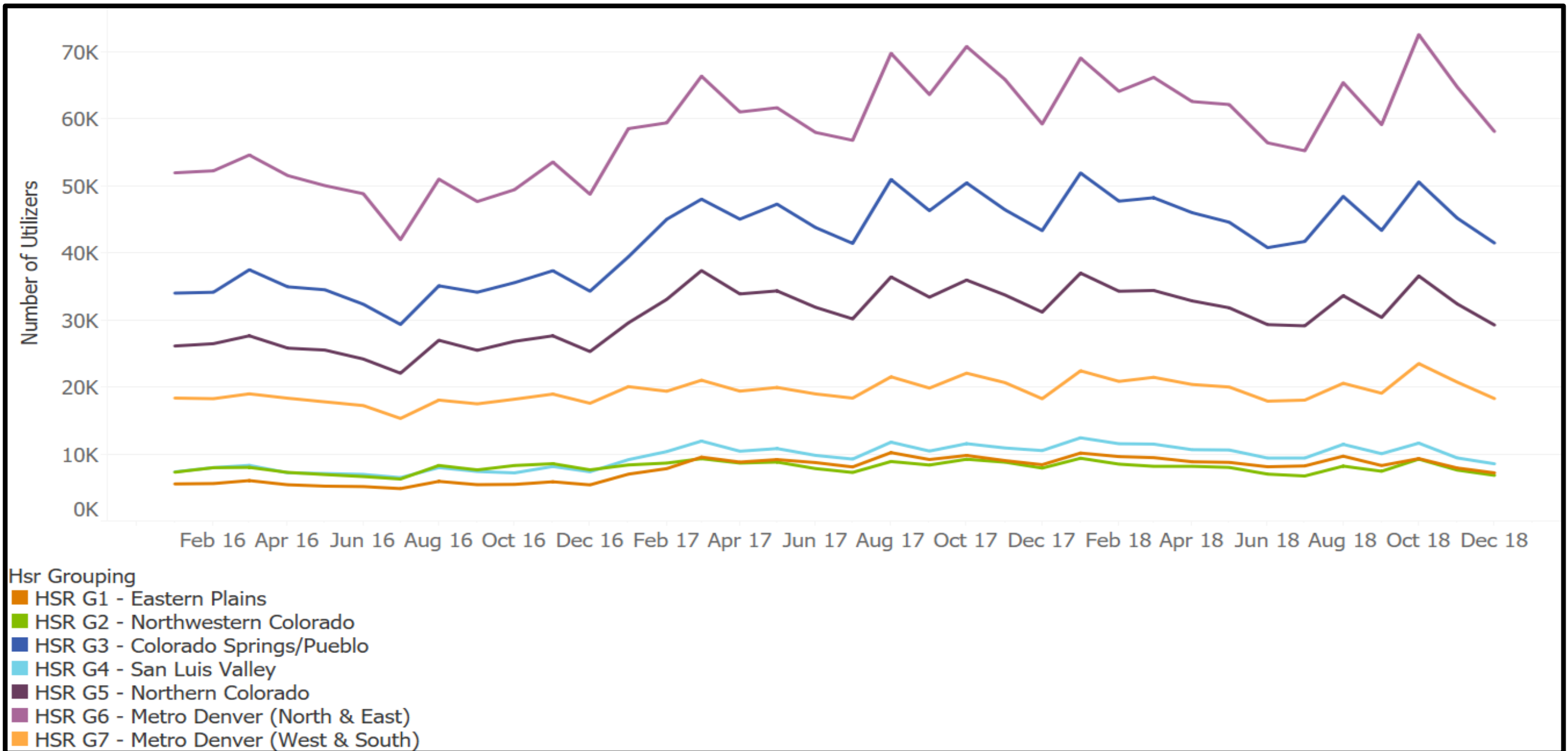
- The AMRP reports on access to five broad categories of services:
 - primary care
 - physician specialists
 - Fee-for-service behavioral health
 - pre- and post-natal obstetrics (including labor and delivery)
 - home health services

Primary Care



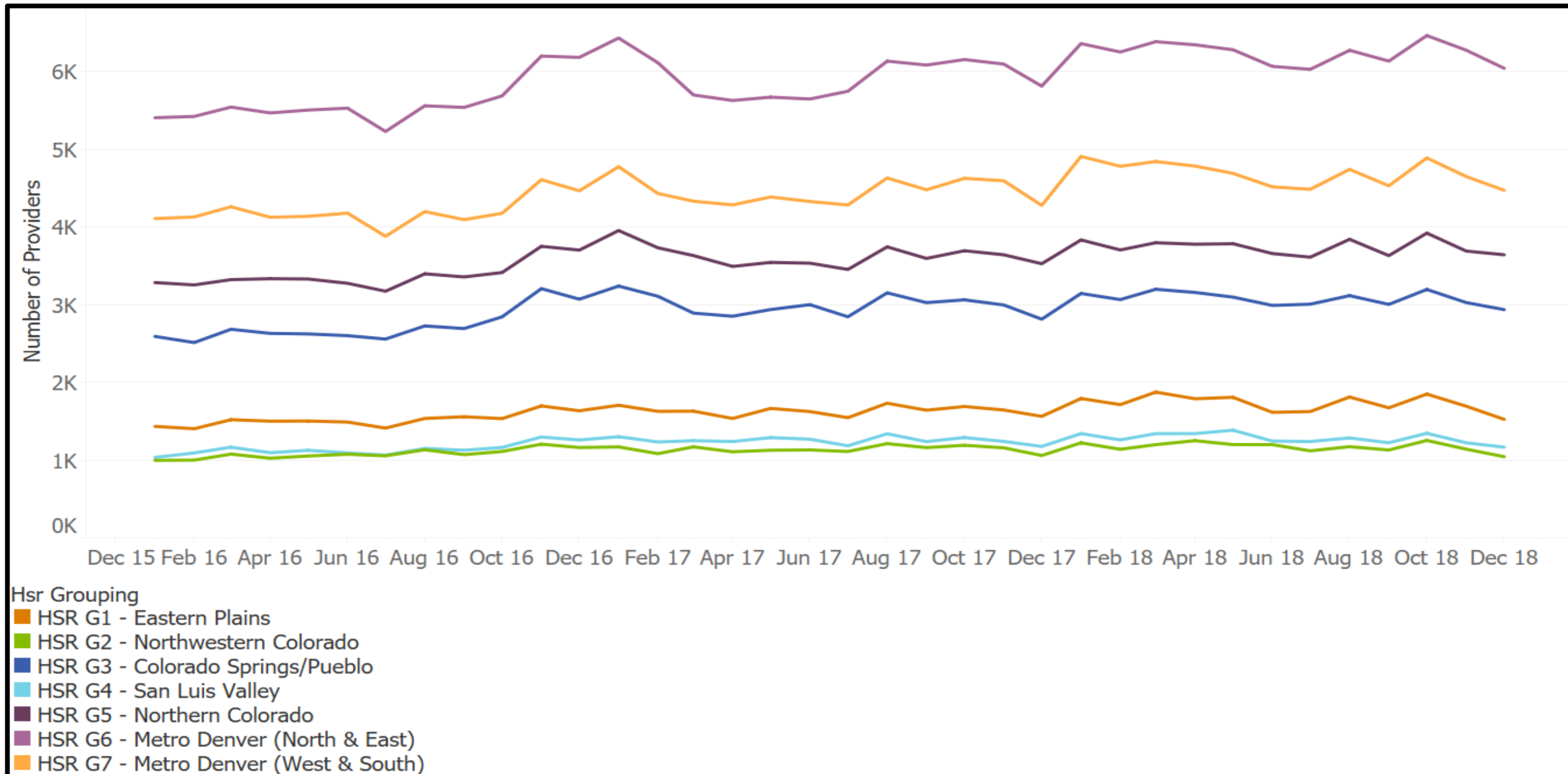
Utilizers

Primary Care



Utilizers

Primary Care



Providers

Primary Care

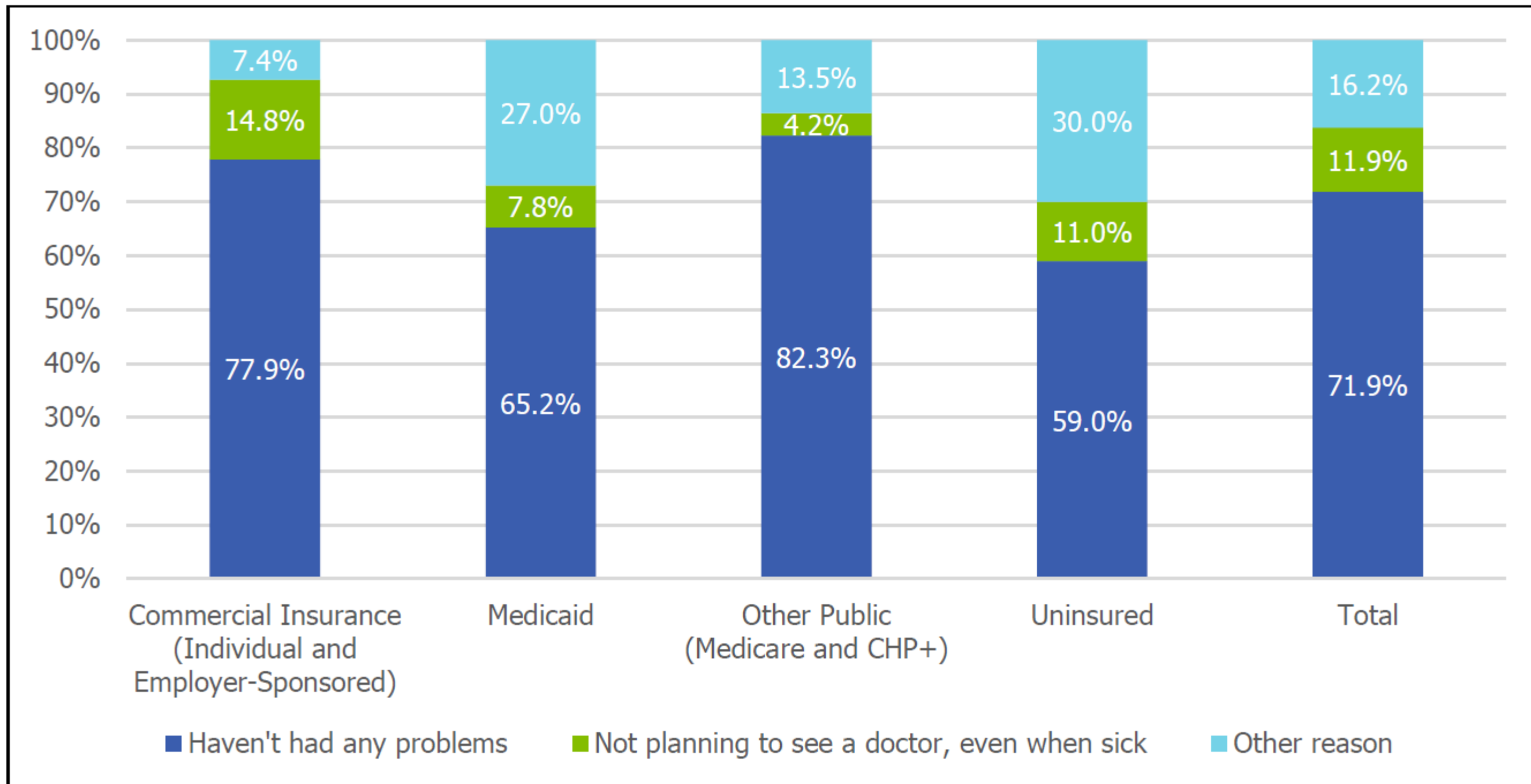
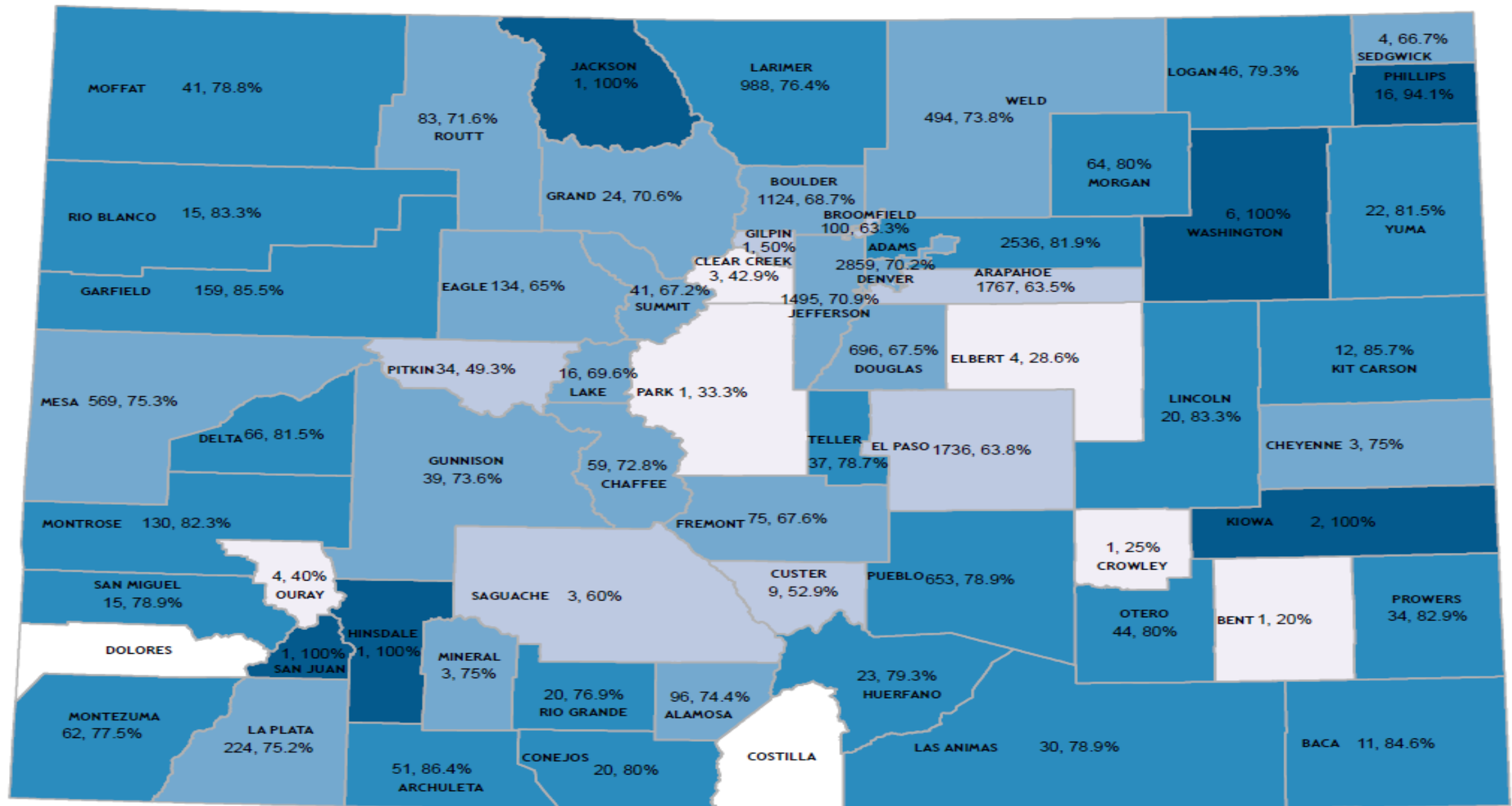


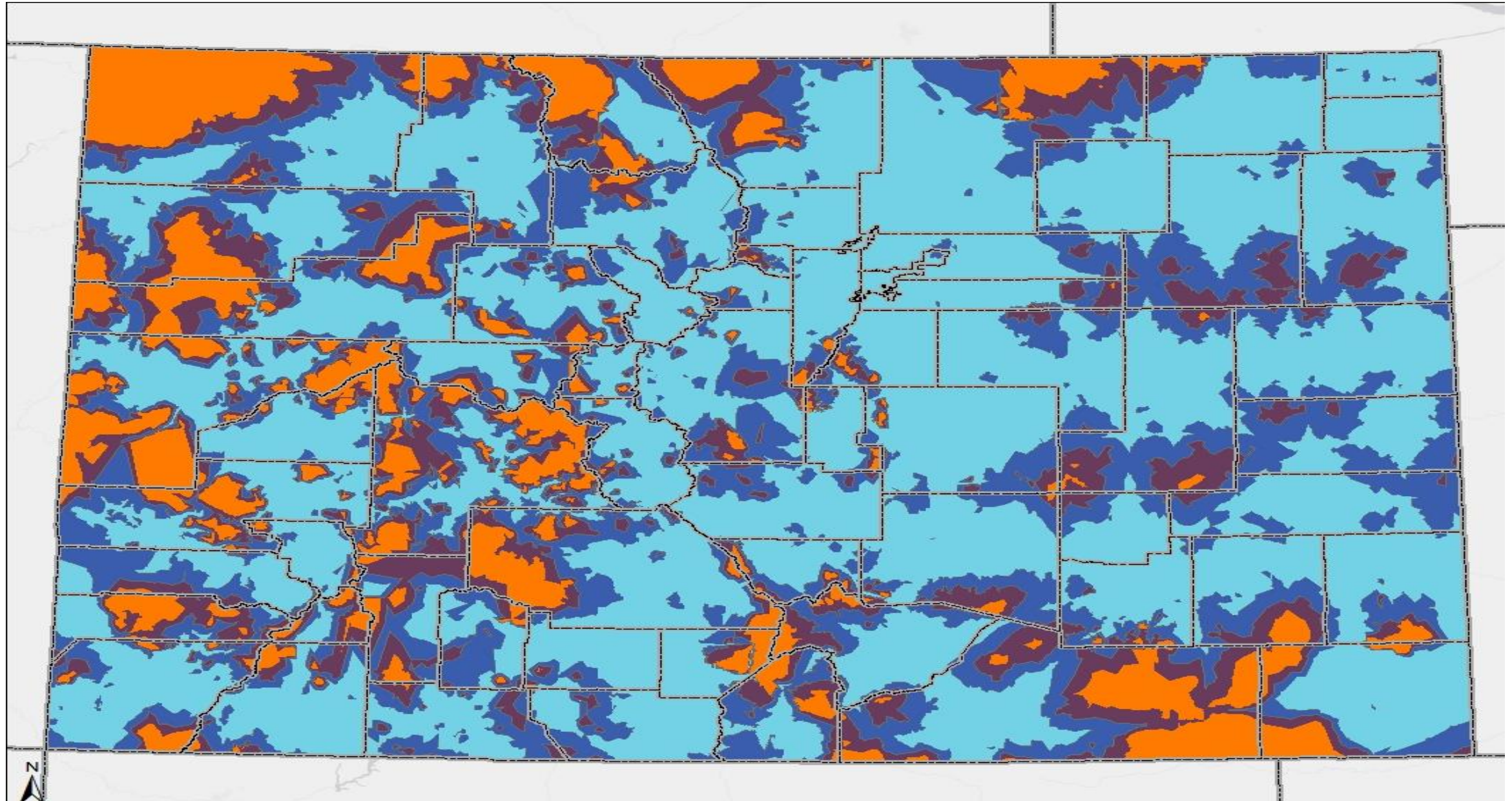
Figure 17 – Reasons for not Having a Usual Source of Care, 2017, by Insurance Type

Primary Care



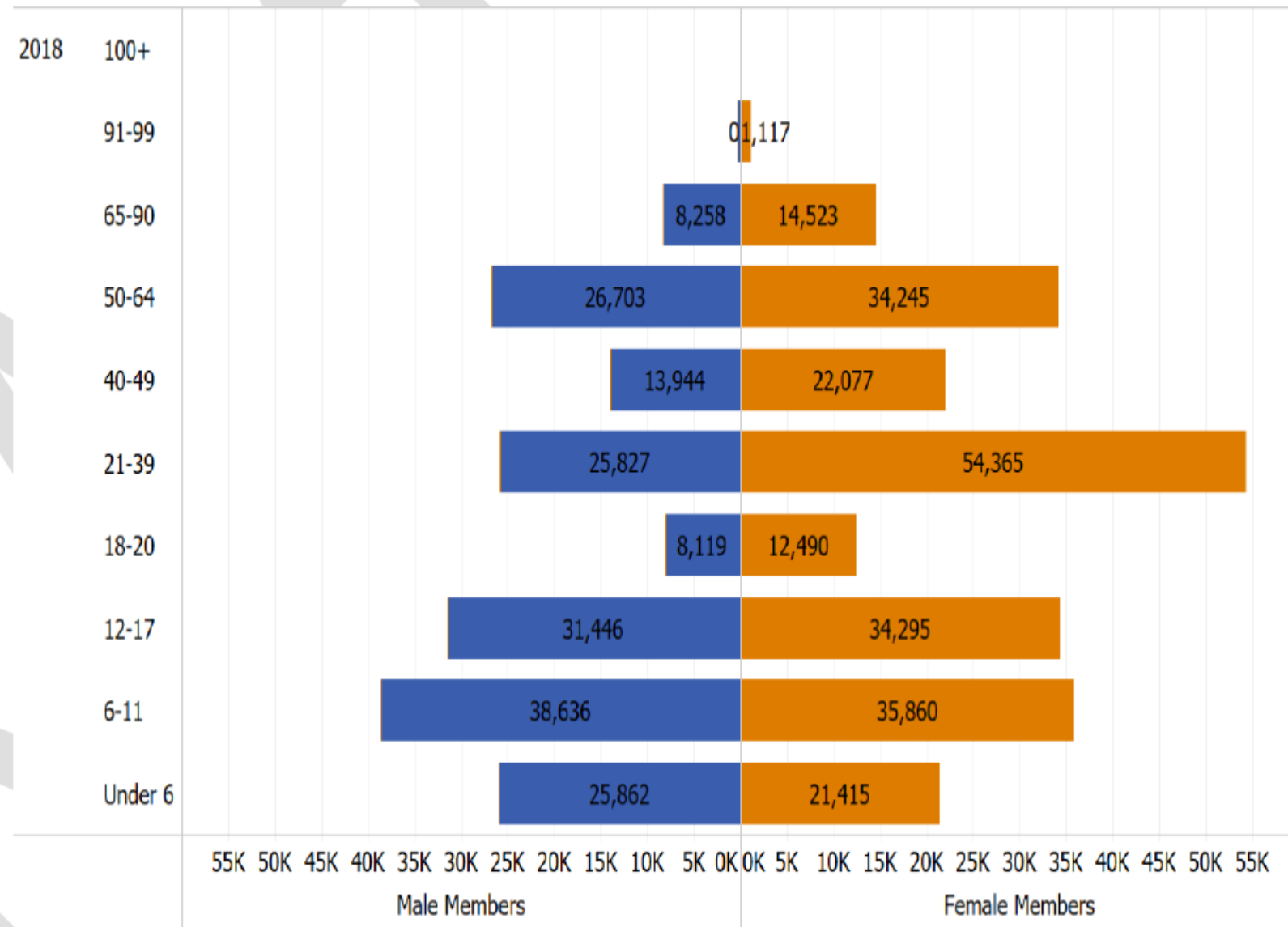
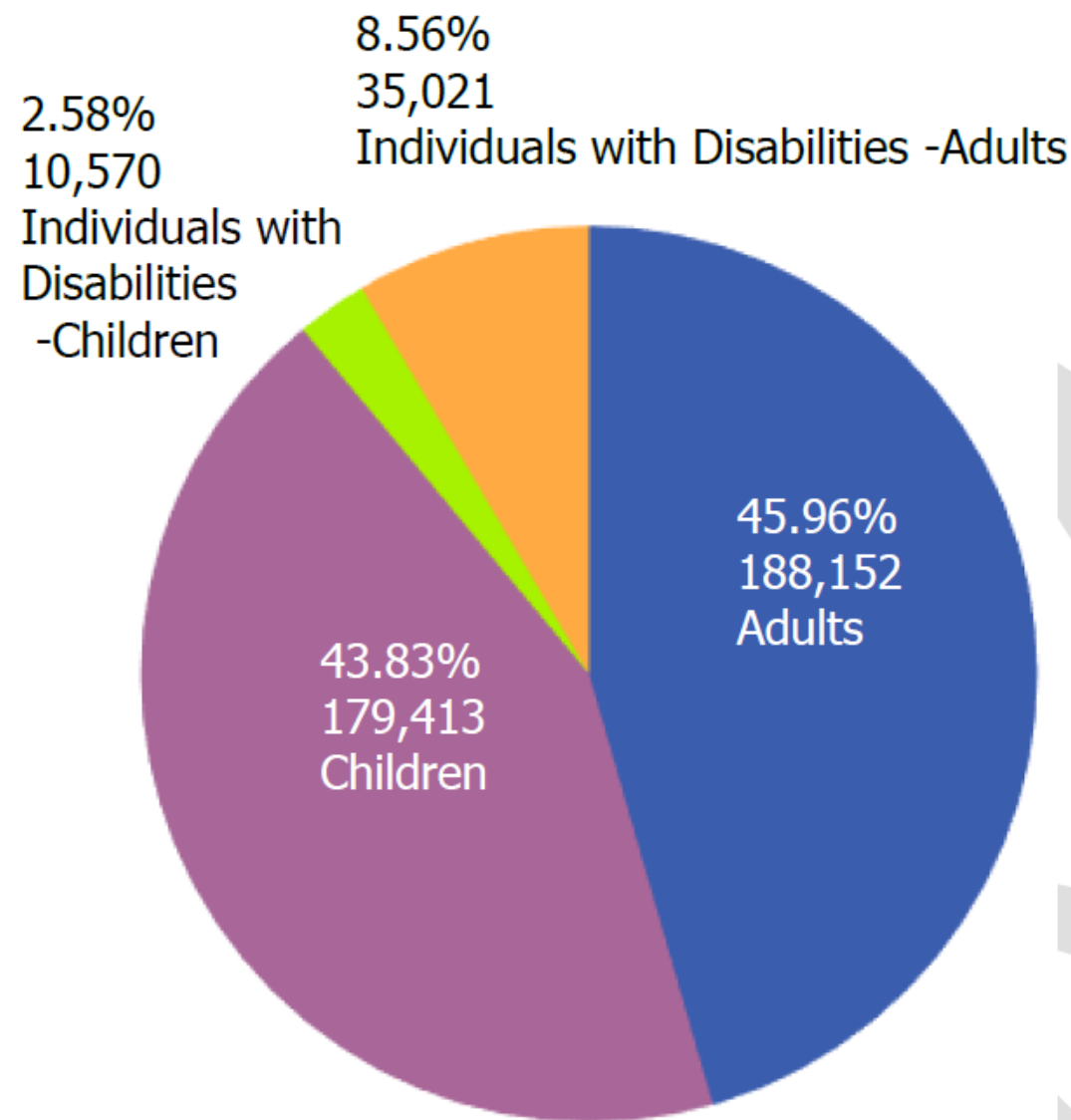
Providers

Primary Care



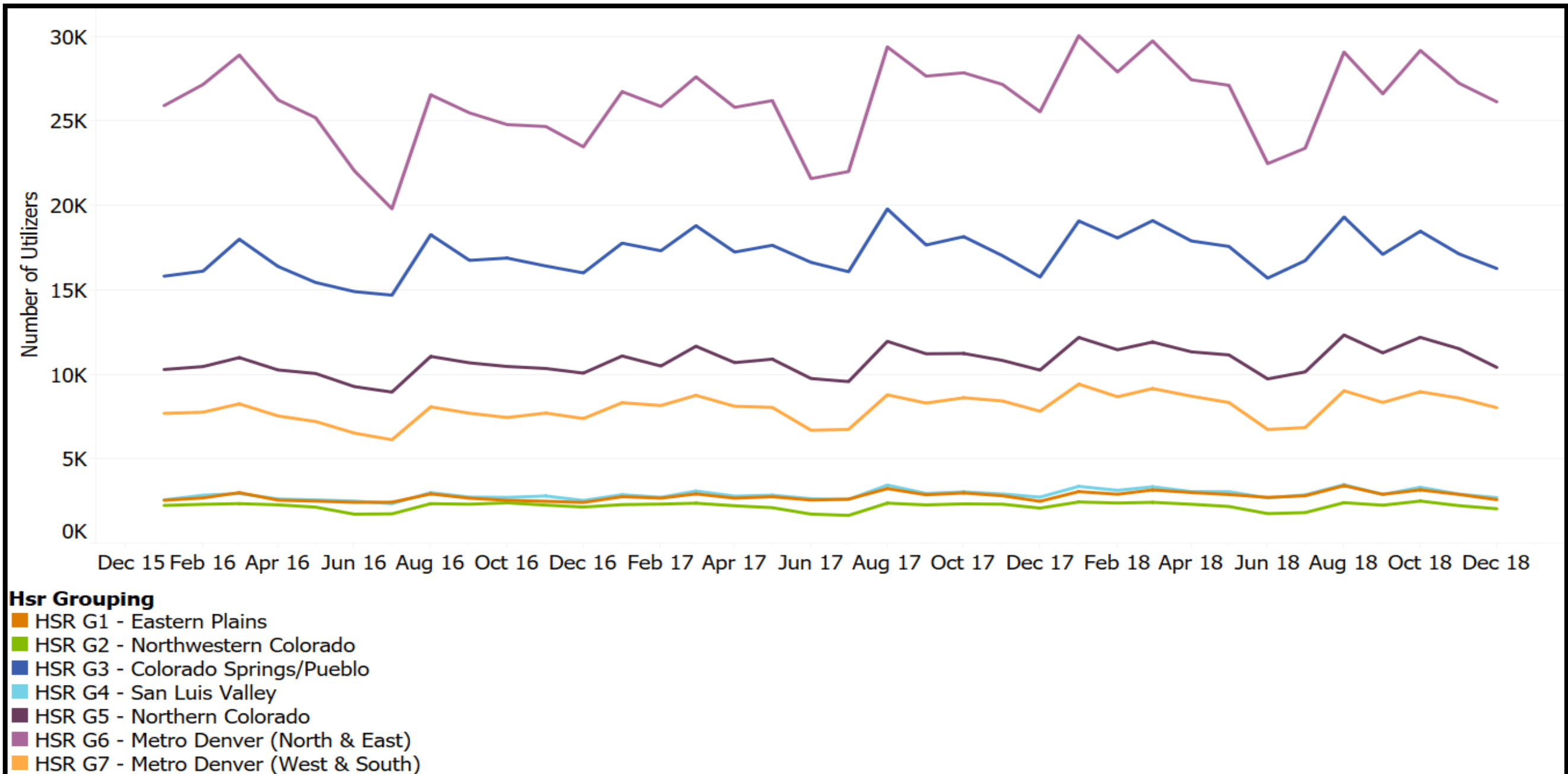
Drive Time

Specialty Care



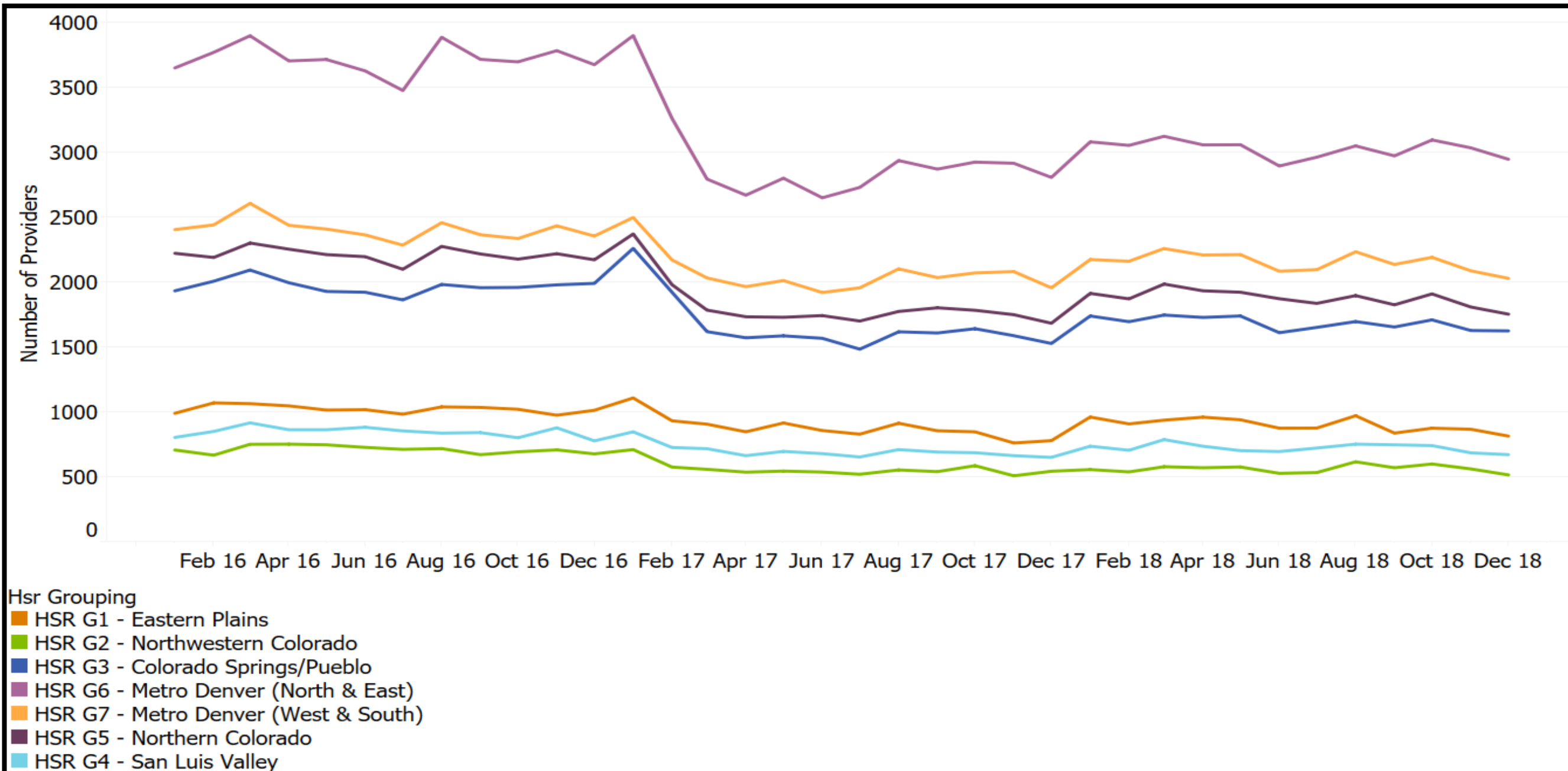
Utilizers

Specialty Care



Utilizers

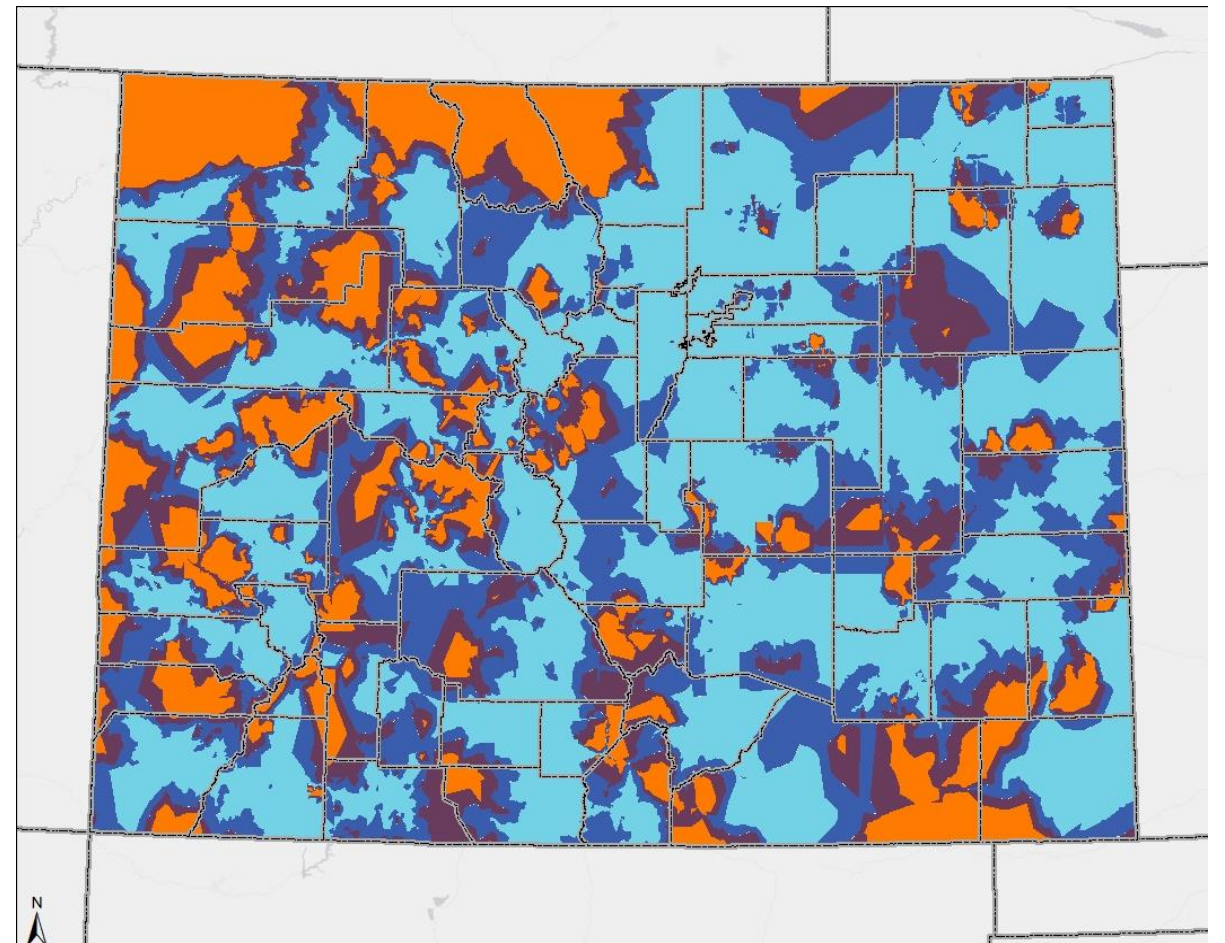
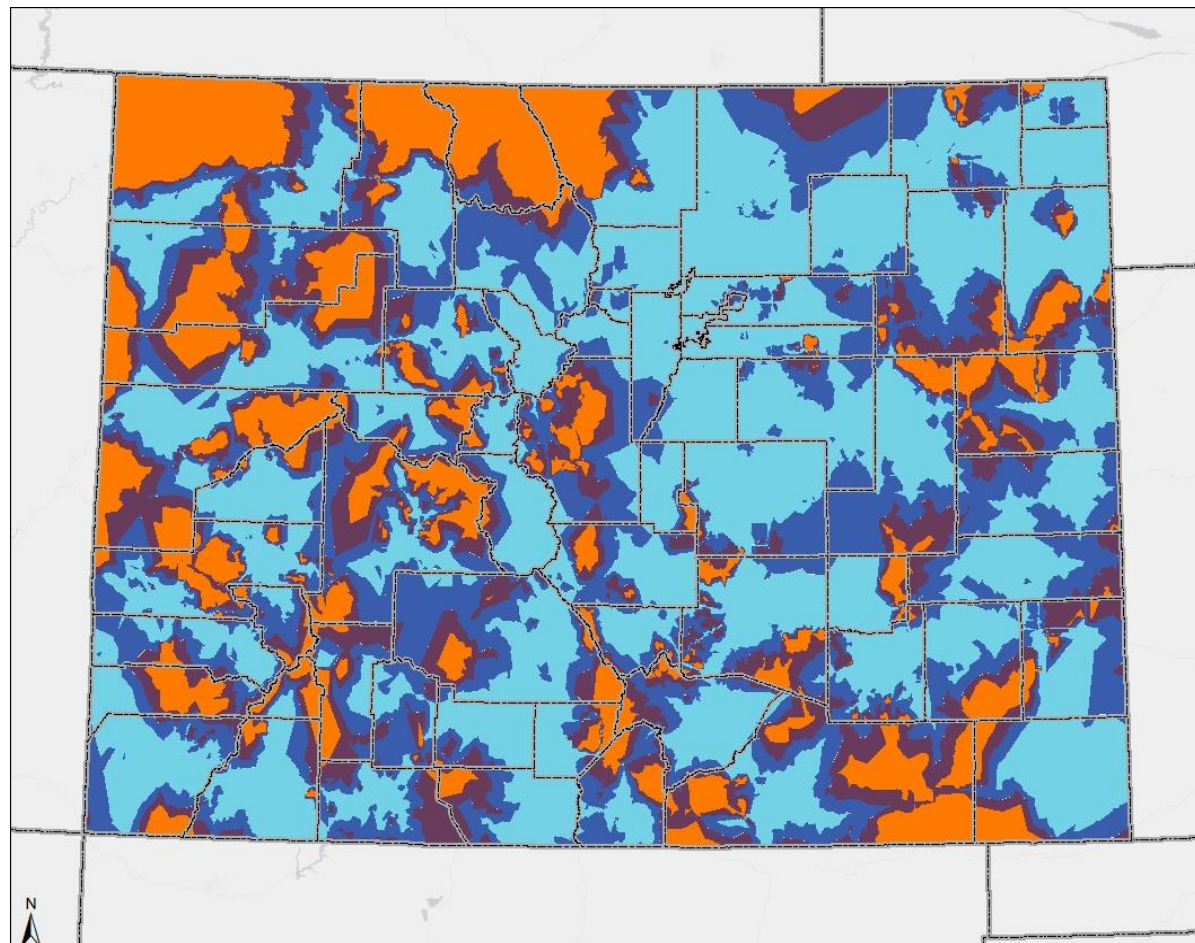
Specialty Care



Providers

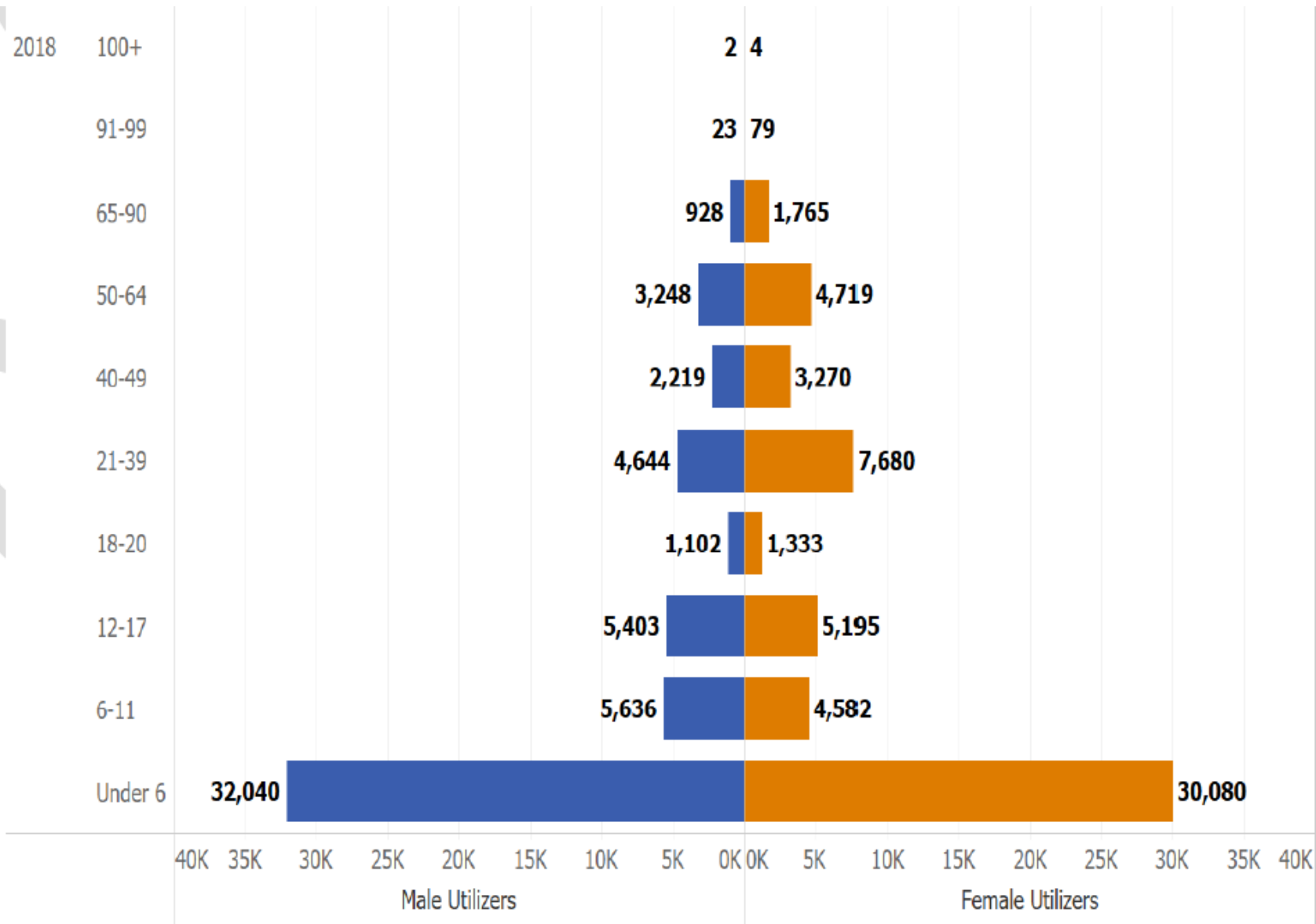
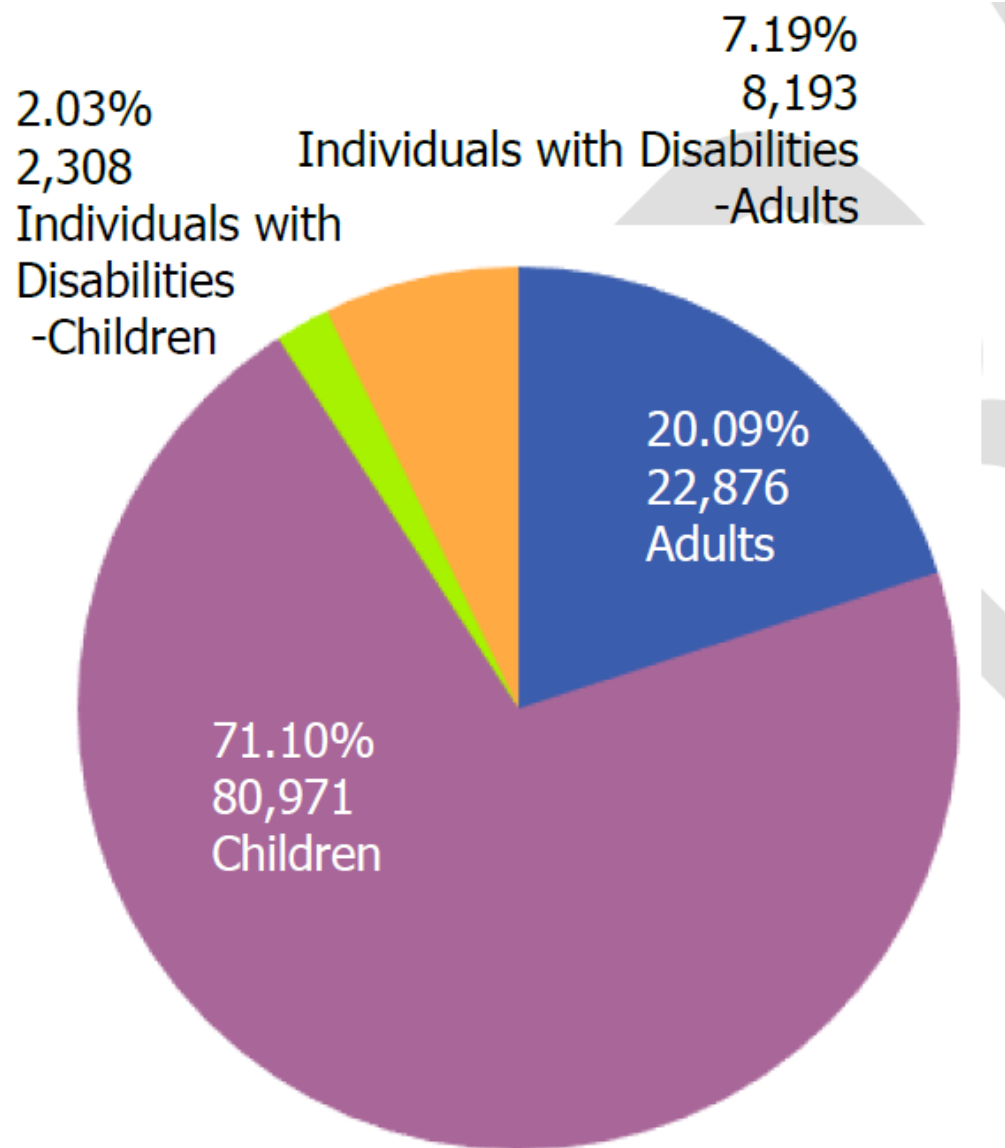
Access Monitoring Review Plan

Specialty Care

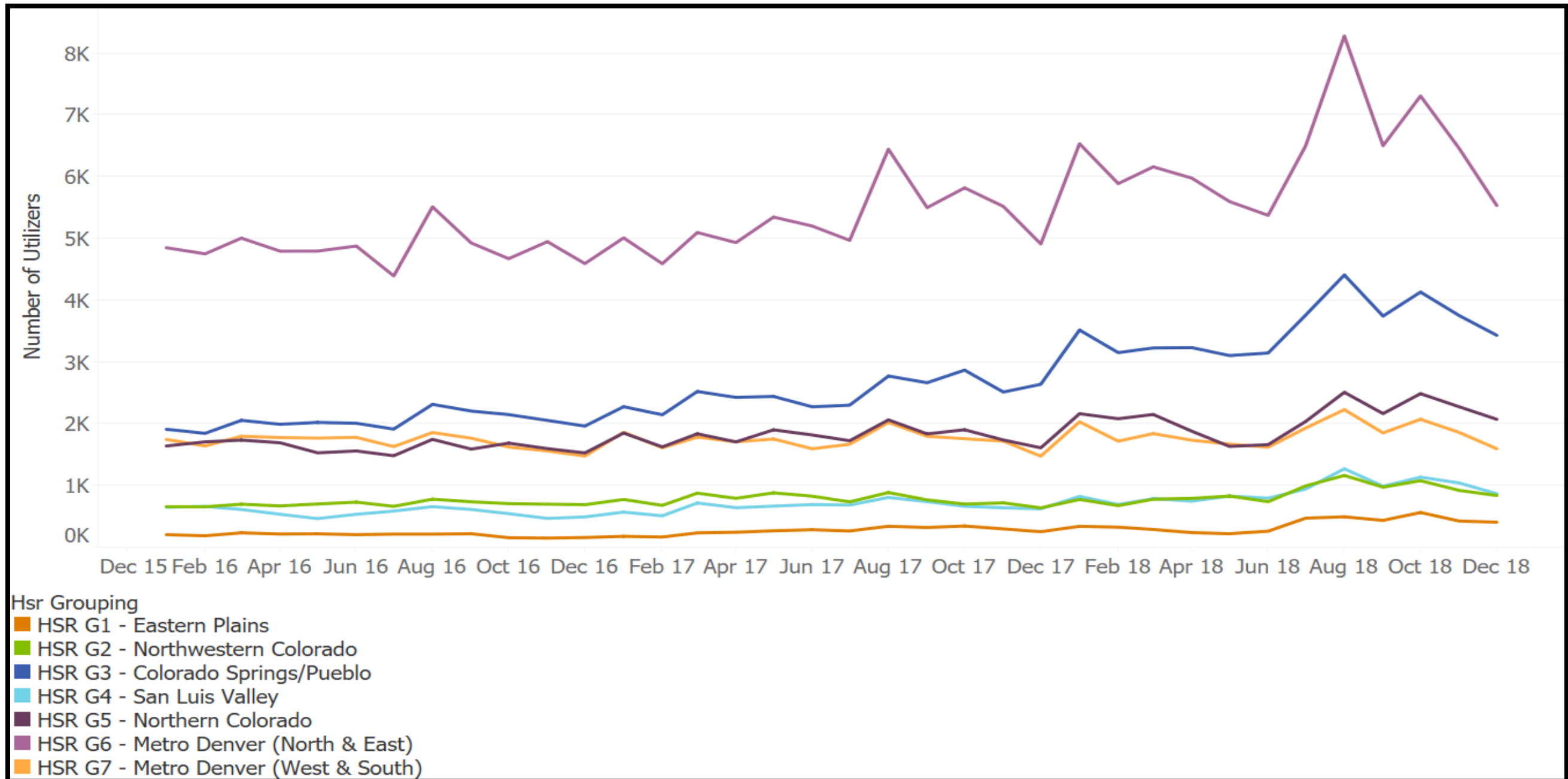


Drive Time

Behavioral Health (FFS)

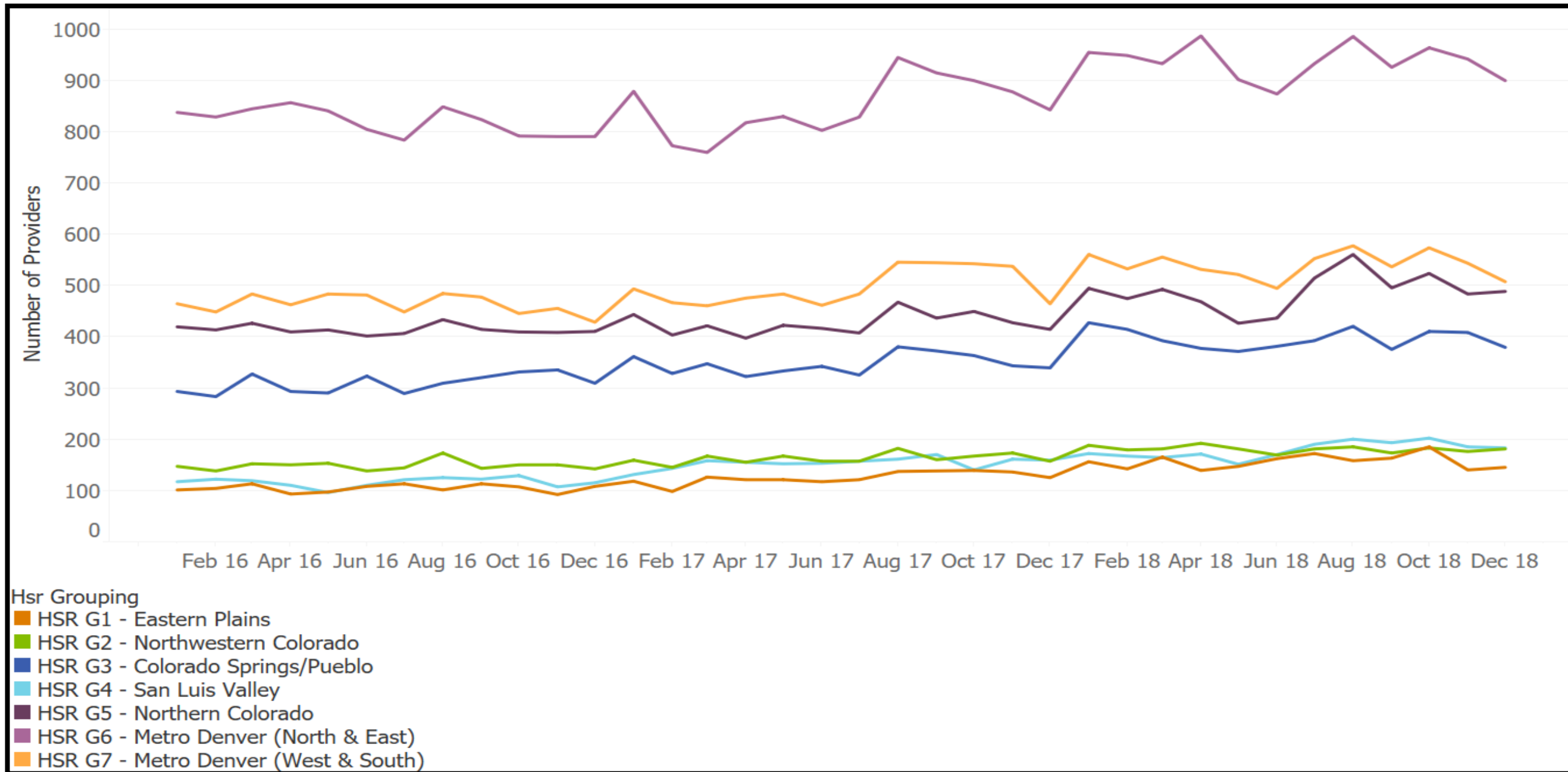


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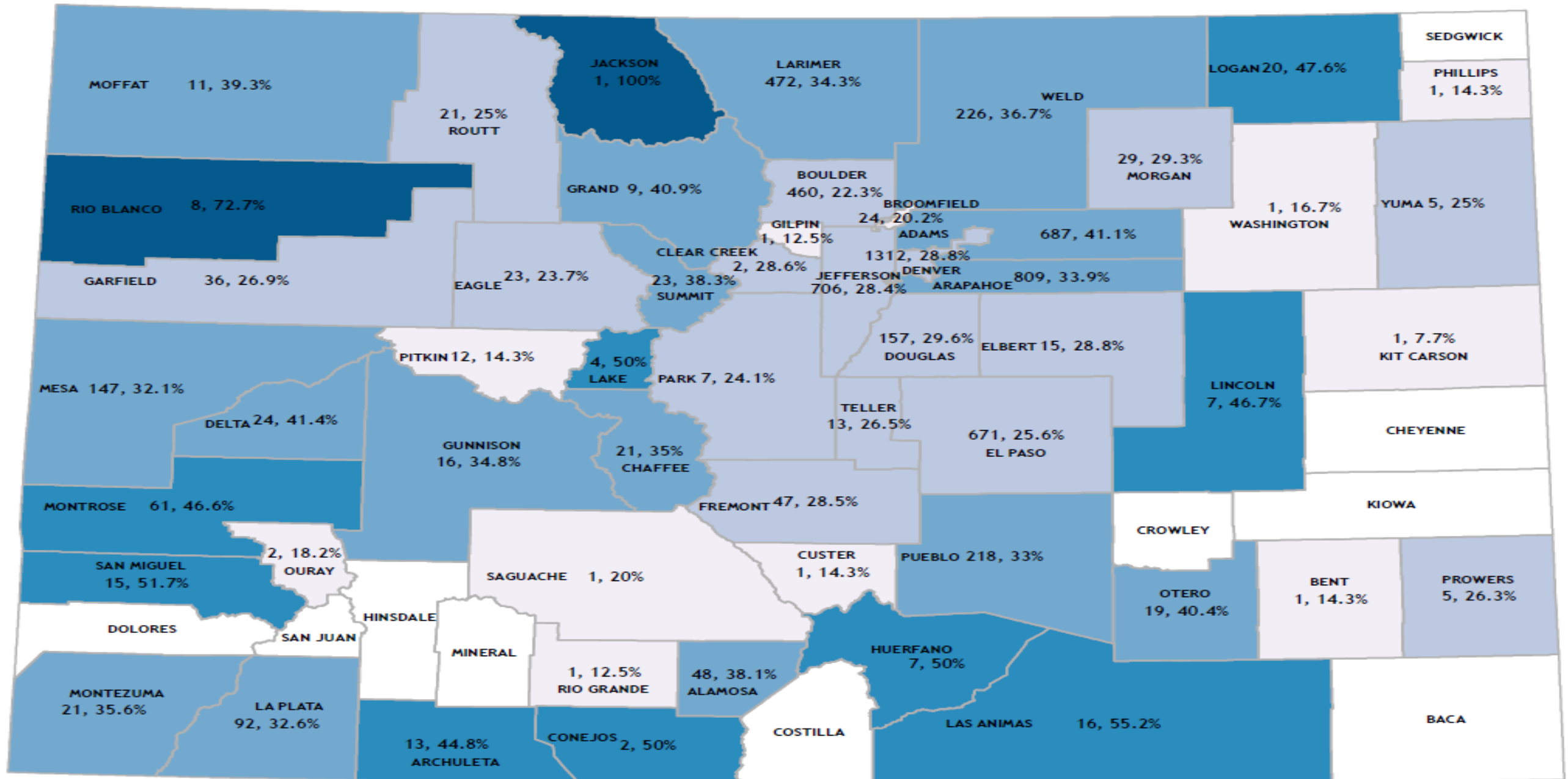
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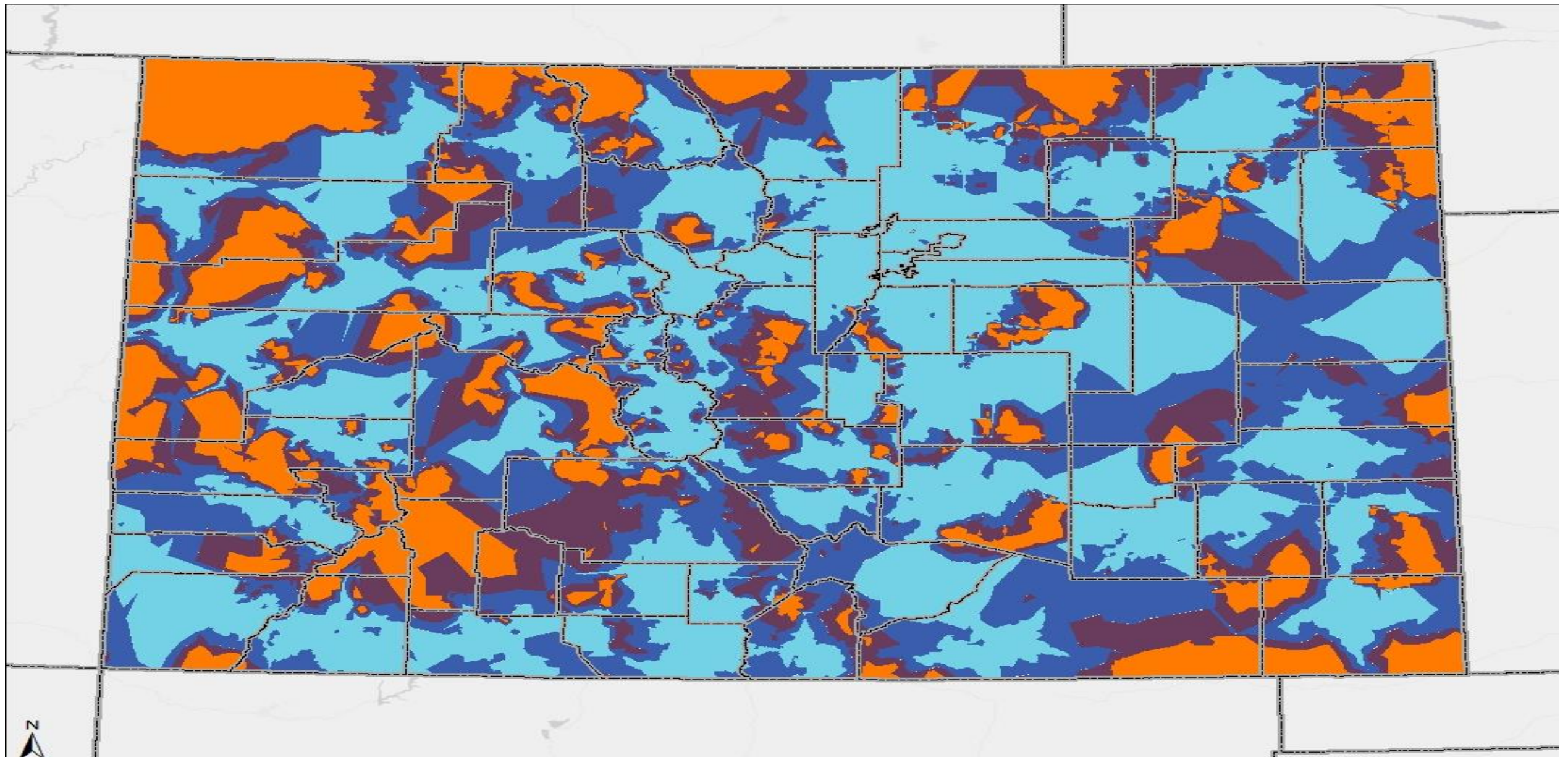
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Behavioral Health FFS



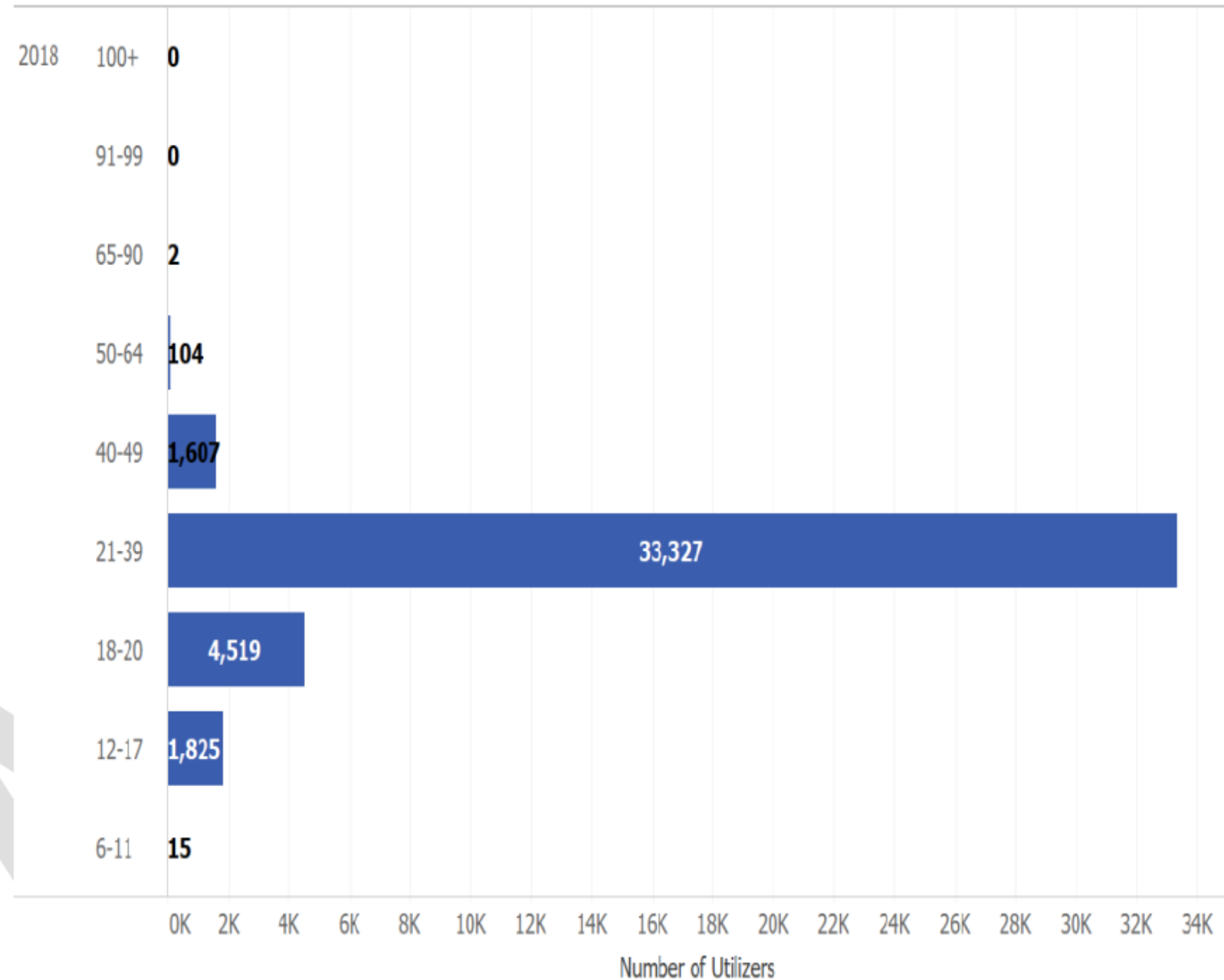
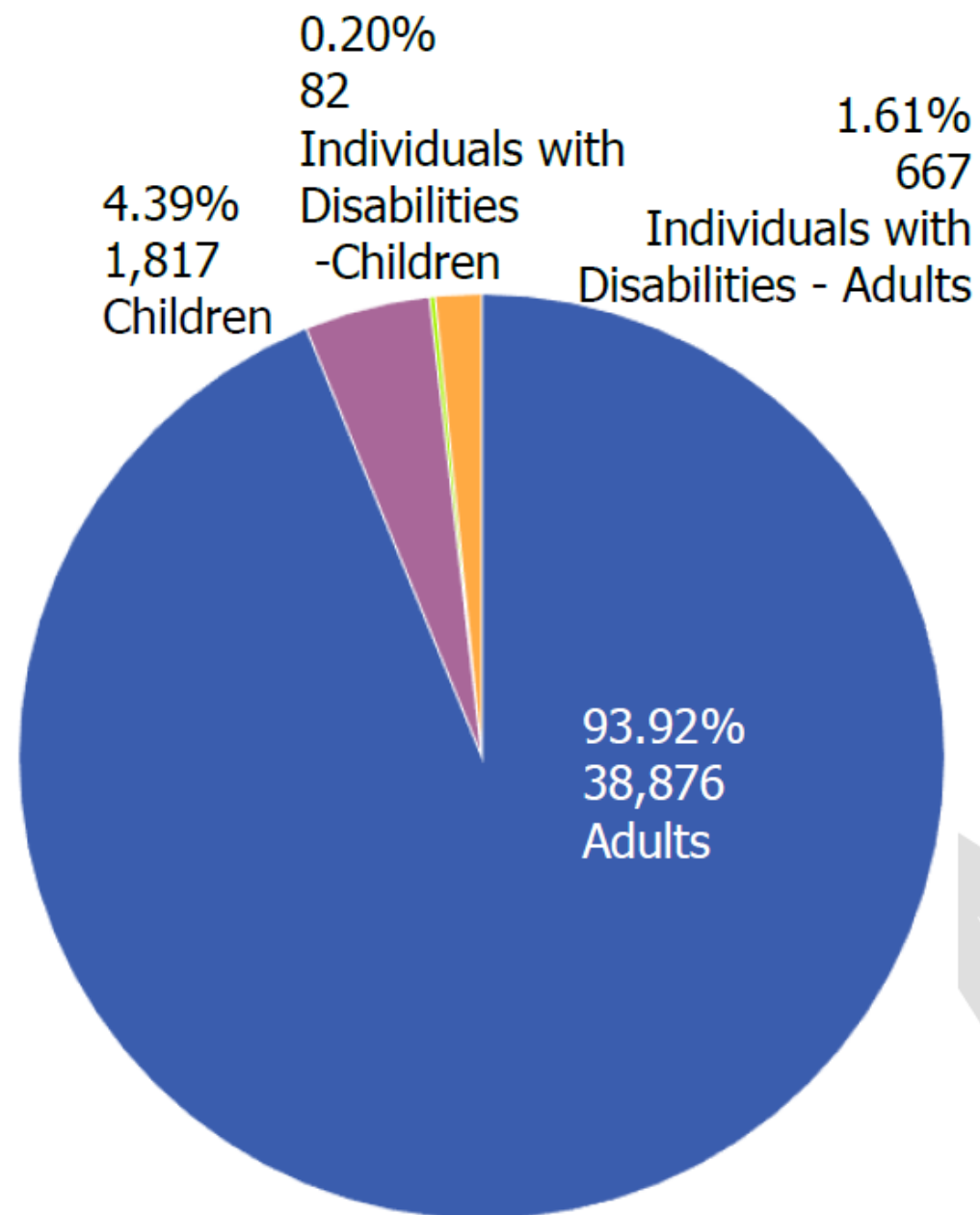
Providers

Behavioral Health FFS



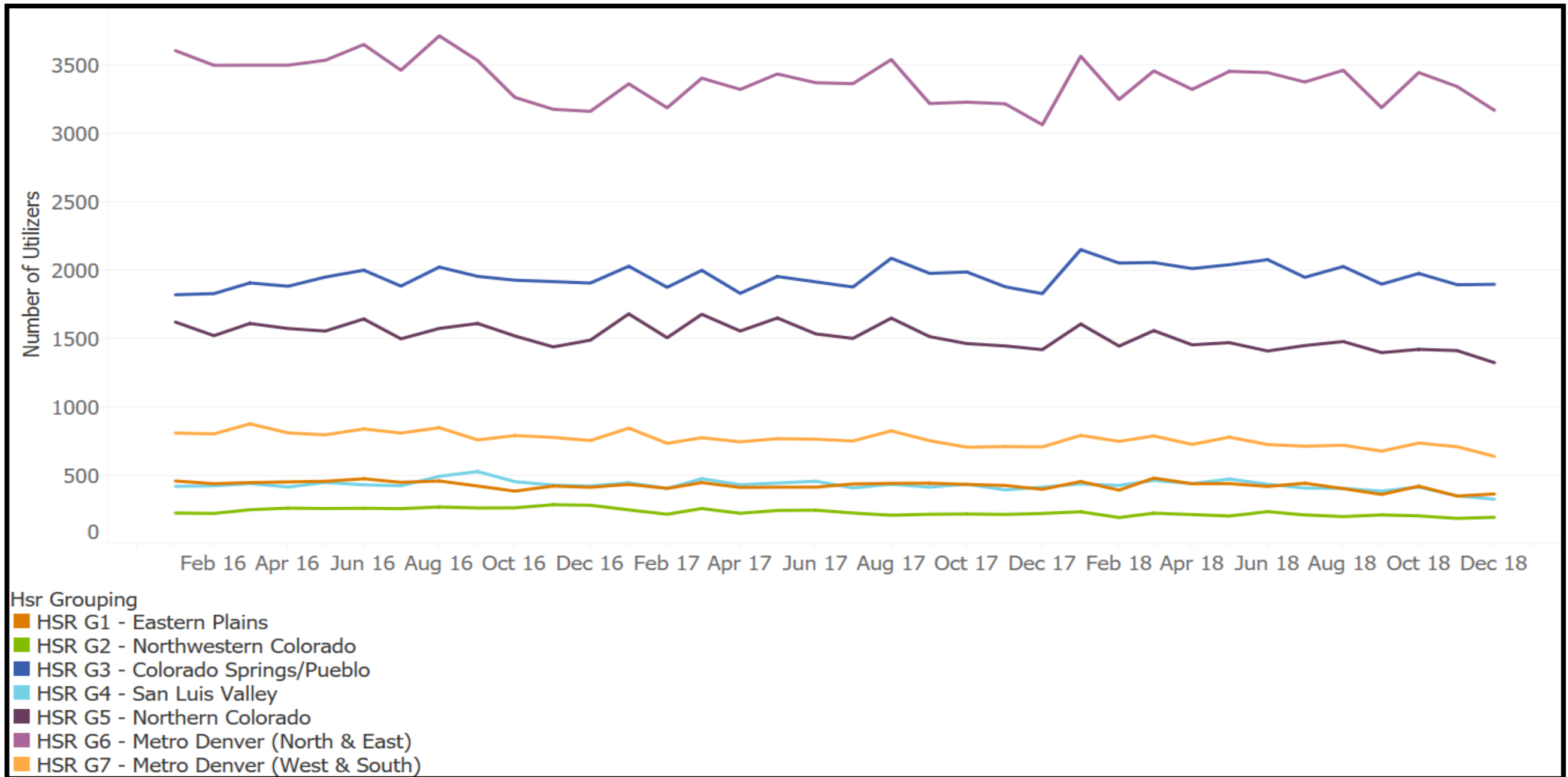
Drive Time

Pre- and Post- Natal Obstetrics



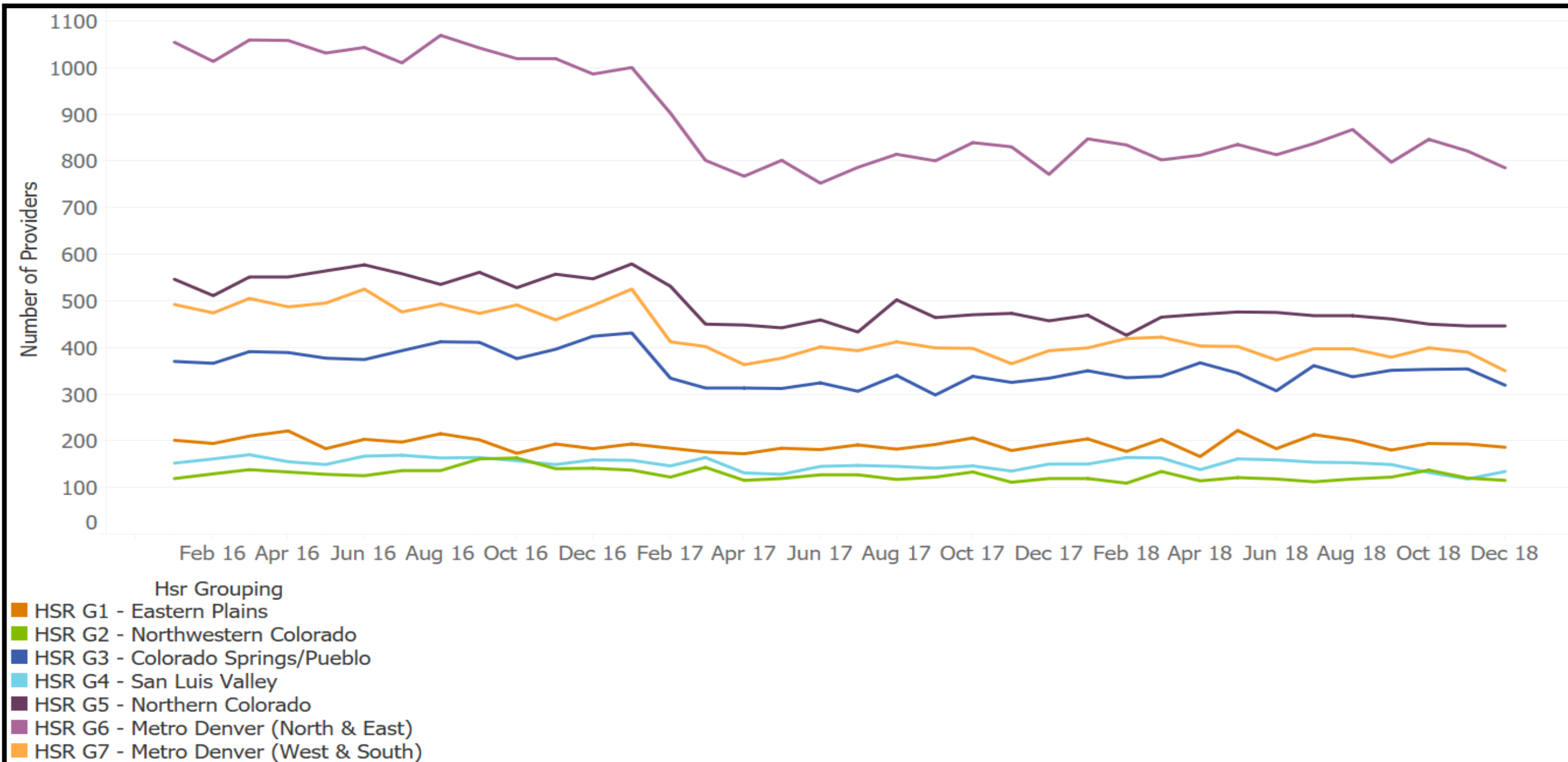
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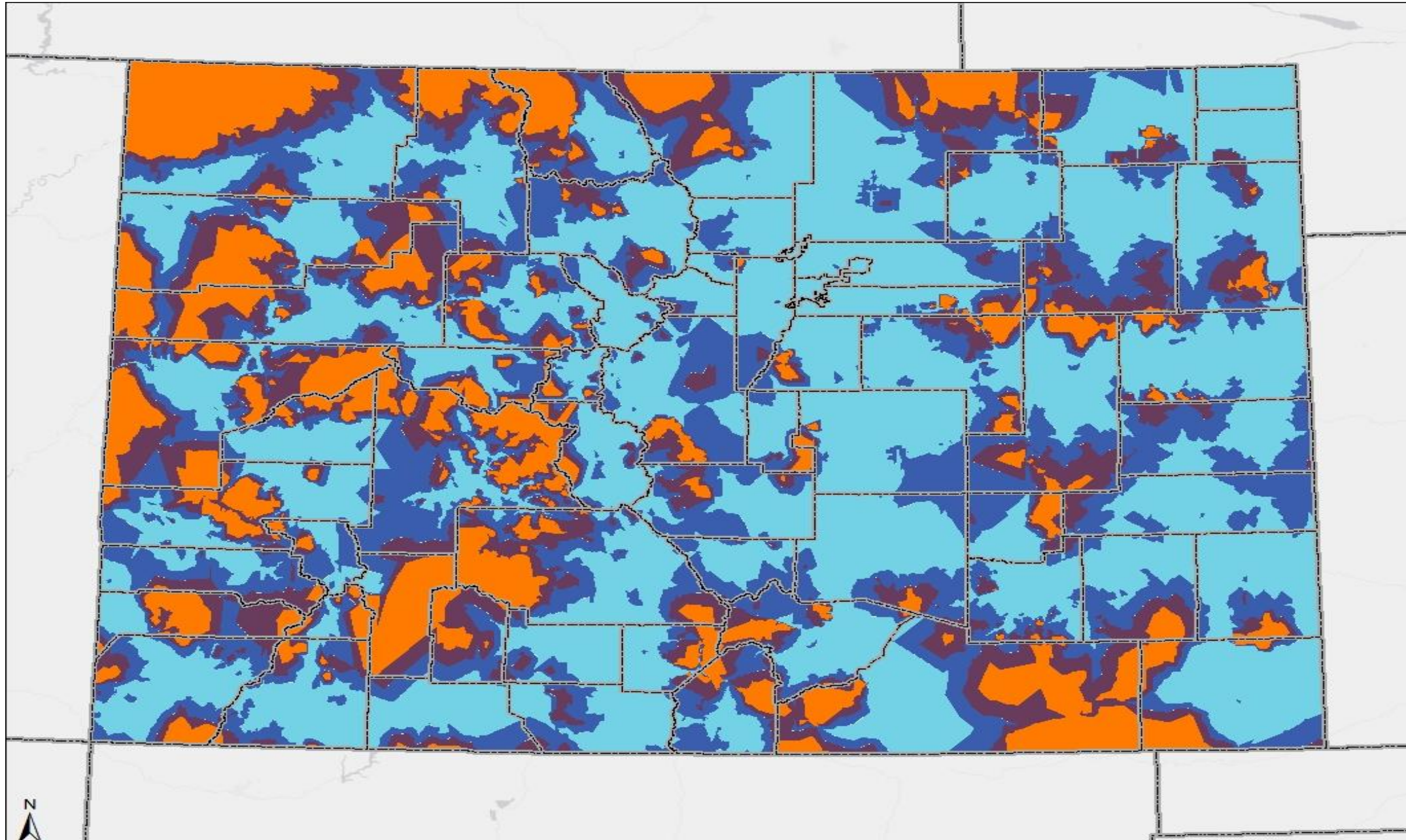
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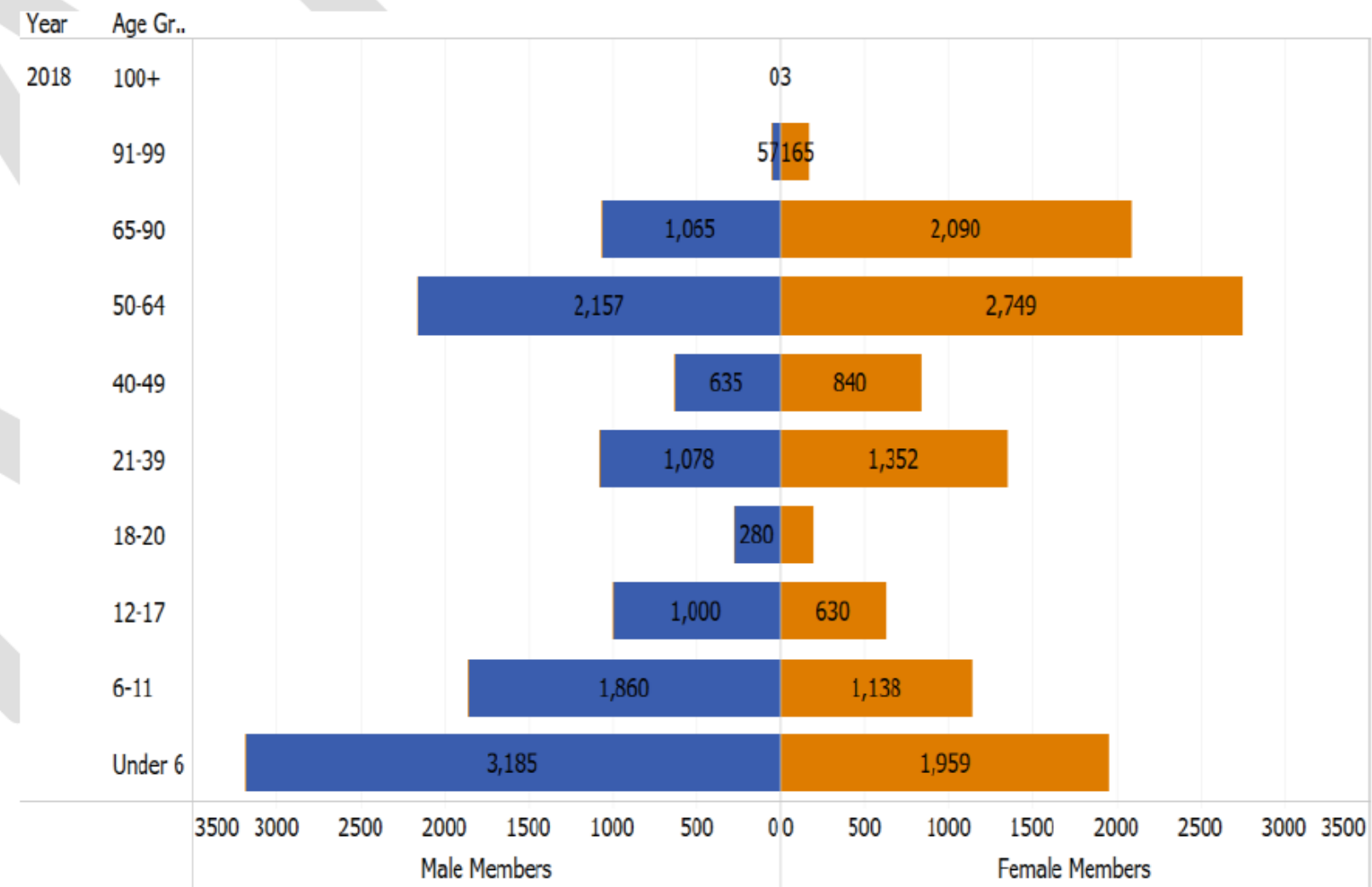
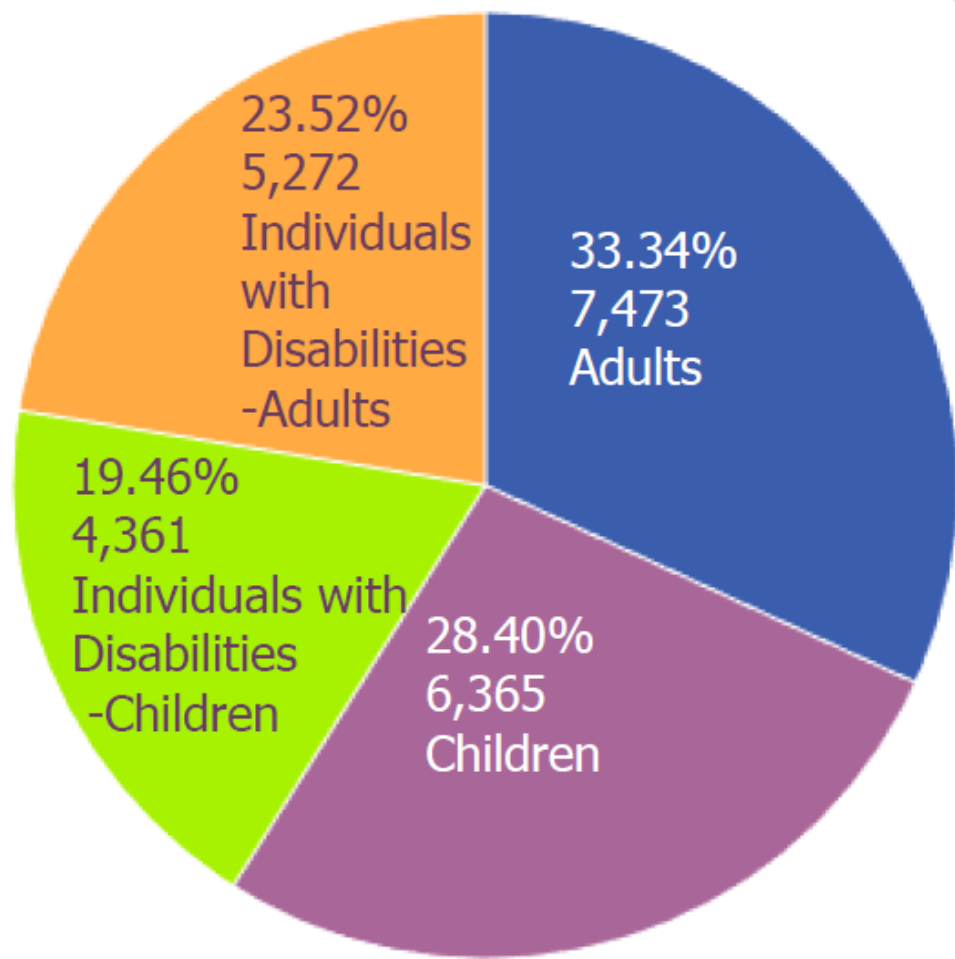
Providers

Pre- and Post-Natal Obstetrics



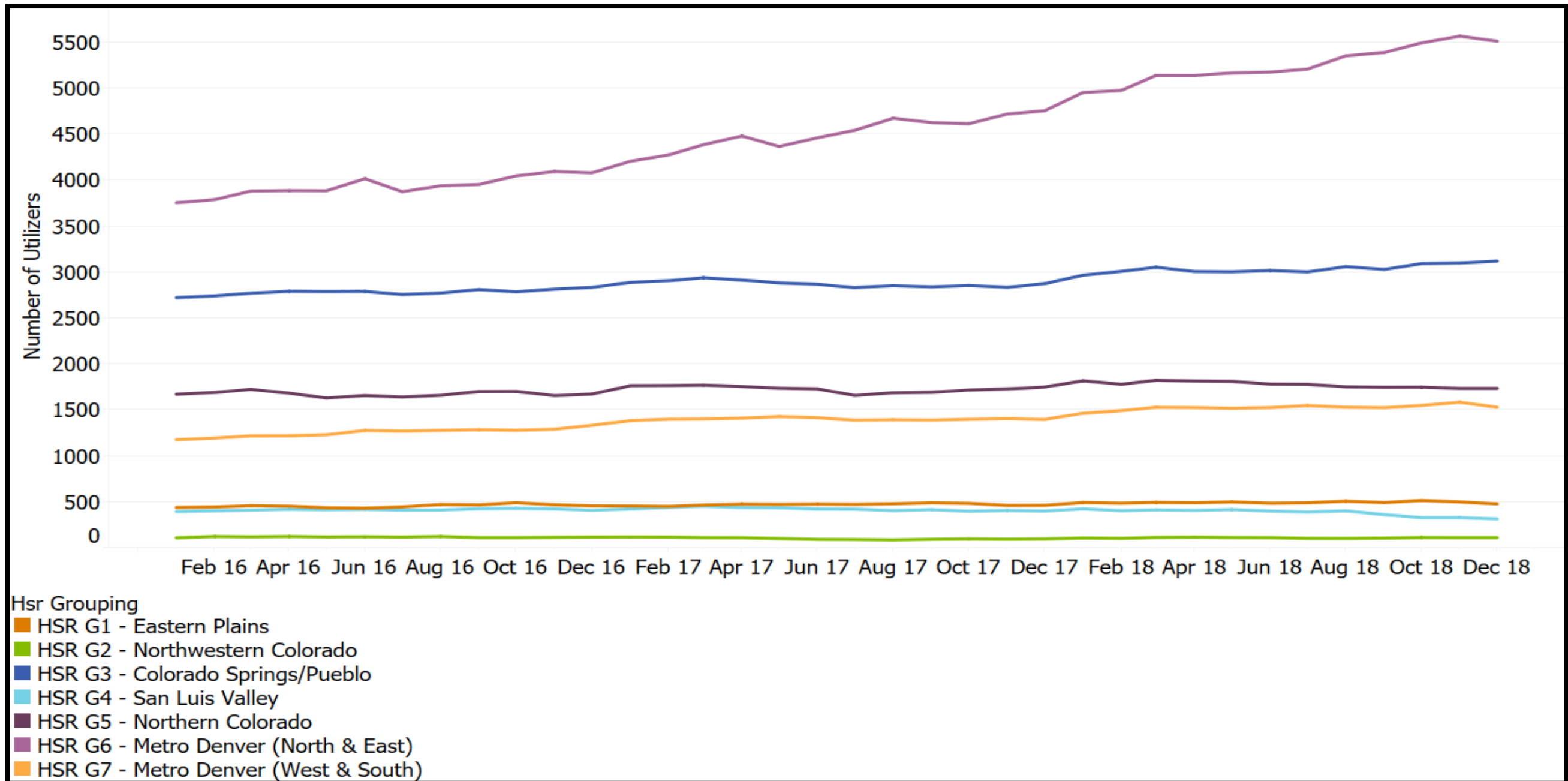
Drive Time

Home Health



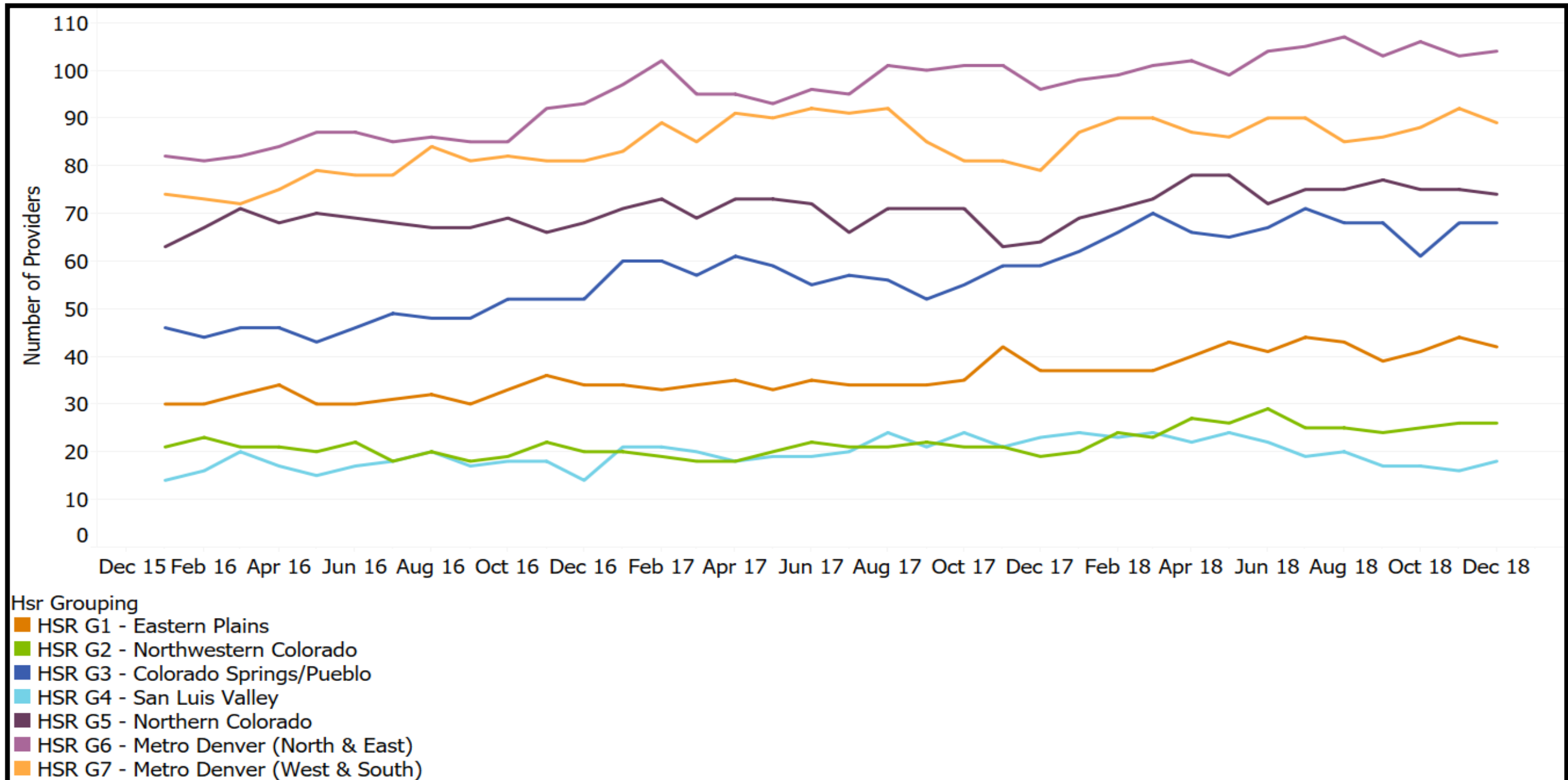
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Home Health



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Home Health



Providers



Questions?

Contact Details

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Thank You!